

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	STQ PEPTIDES
Attorney Docket Number::	05986/100M228-US1
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	5
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Peter
Middle Name::	C.
Family Name::	Brooks
City of Residence::	Carmel
State or Province of Residence::	NY
Country of Residence::	US
Street of mailing address::	4 East Boyds Rd.
City of mailing address::	Carmel
State or Province of mailing address::	NY
Postal or Zip Code of mailing address::	10512

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Abebe  
Family Name:: Akalu  
State or Province of mailing address:: NY

**Correspondence Information**

Correspondence Customer Number:: 07278

**Representative Information**

Representative Customer Number:: 07278

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/458,523	03/28/03

**Assignee Information**

Assignee name:: NYU Medical Center  
Street of mailing address:: 550 First Avenue  
City of mailing address:: New York  
State or Province of mailing address:: NY  
Postal or Zip Code of mailing address:: 10016